

Wasatch Mental Health

“Embracing Wellness”



2011

Annual Report

WASATCH MENTAL HEALTH SERVICES SPECIAL SERVICE DISTRICT

AUTHORITY

State law assigns the responsibility of administering local mental health services to county government. Wasatch Mental Health is a Special Service District of Utah County, governed by the oversight of the Utah County Commissioners, who serve as the center's Authority Board.

REPORT TO THE COMMUNITY

As the elected officials directly responsible for the provision of community mental health services in Utah County, the Board takes its responsibility to the residents and the clientele of Wasatch Mental Health very seriously.

Wasatch Mental Health is recognized among mental health centers in Utah for its efficient operations and maximization of services to clientele for the money expended. We are proud to provide a full array of mental health services to Medicaid eligible residents of Utah County.

The Wellness Recovery Clinic, Vantage Point, New Vista, and the Receiving Center expand the provided services to a broader population.

This last year, our collaborative partnership with the Food and Care Coalition has afforded us the opportunity to co-locate our Watch Clinic for the homeless mentally ill within the new Food and Care Coalition facility. This has enhanced access for clients and improved the continuity of service delivery for clients served by our Watch clinic for the Homeless.

We look forward to continuing and expanding our excellence in service provision in Utah County.



**Commissioner
Larry Ellertson
Board Chair**



**Commissioner
Gary Anderson
Vice Chair**



**Commissioner
Doug Witney
Board Member**

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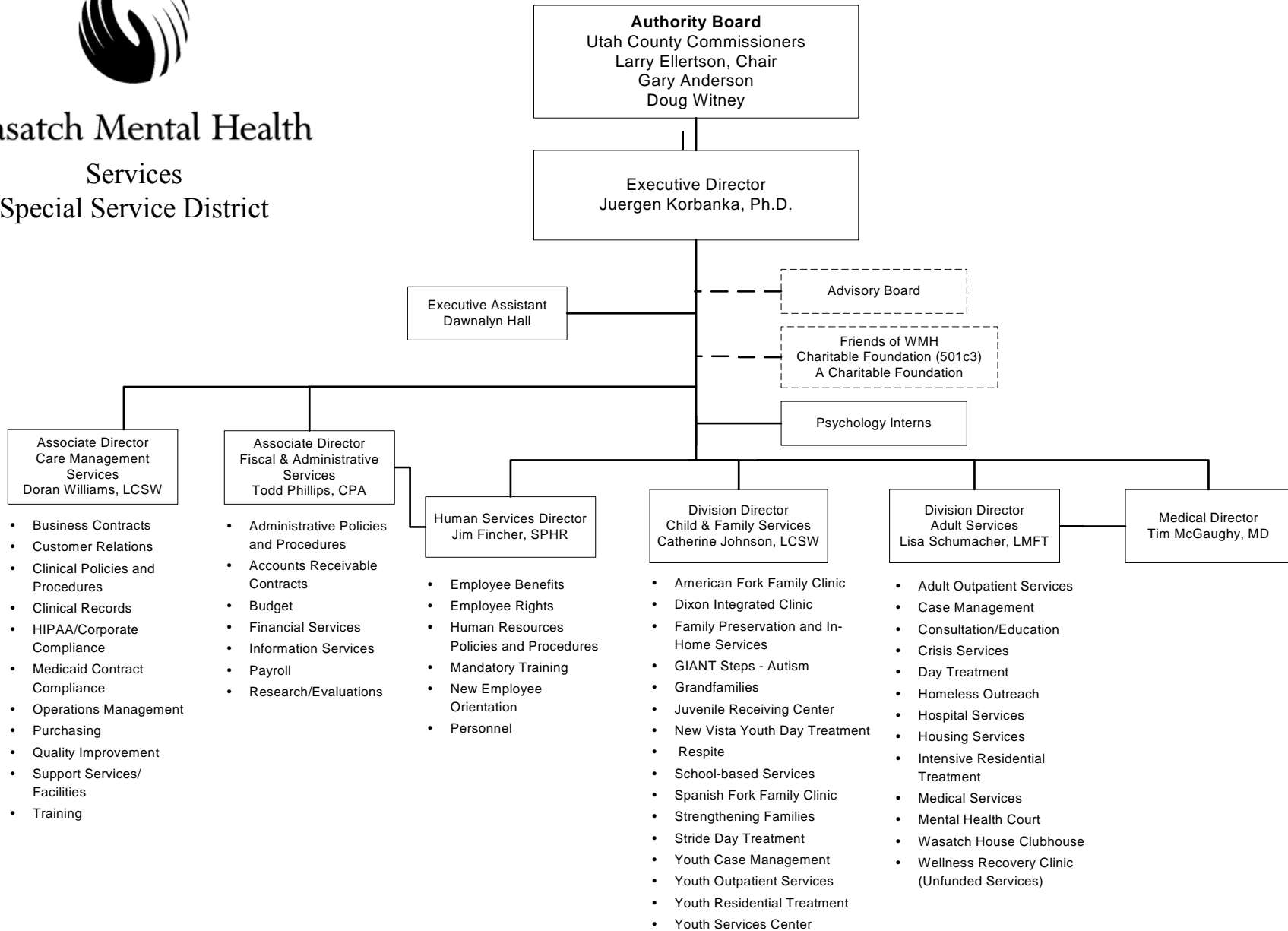
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Wasatch Mental Health
 Services
 Special Service District

WASATCH MENTAL HEALTH



MESSAGE FROM THE DIRECTOR

It is a pleasure to present the Fiscal Year 2011 Annual Report to our Board of County Commissioners, our local and state government officials, allied agencies, and the citizens of Utah County.

Our Authority Board consisting of Commissioners Larry Ellertson (Chair), and Gary Anderson (vice-chair), and Doug Witney continue to demonstrate an exemplary commitment to our mission and goals. We thank them for their investment of time and strong support.

The services, initiatives, and outcomes in this Report are reflective of Wasatch Mental Health's four pronged mission to (1) provide excellent mental health services, (2) provide excellent customer service, (3) provide economic stability, and (4) provide opportunities for employee growth and development.

We appreciate the collaborative partnerships with our allied agencies to facilitate a seamless array of community services. We wish to thank all who have supported our efforts over this last year.

During FY 2011, the demand on services provided by Wasatch Mental Health continued to increase. We provided services to almost 7,200 Utah County residents (an increase of almost 3% over the previous year). We achieved this service capacity increase by further examining our processes to maximize the utilization of our resources. Further, we made a concerted effort to decrease failed and/or broken appointments by implementing a call reminder protocol for our outpatient clinics.

All of Wasatch Mental Health's accomplishments and initiatives of FY 2011 are a reflection of our core values, our commitment to excellence and our goal to be an innovative leader in community mental health. Over this last year, we were able to: (1) complete the renovation of our Westpark Building to create an open and inviting client reception and waiting area; (2) purchase a 16,000 sqft office building in South Provo; (3) relocate our Records department at the South Provo location to free up additional office space at our Westpark Building; (4) Relocate the Wellness Recovery Clinic to the South Provo location; (5) transitioned our Youth Residential Juvenile Sex Offender treatment to a Youth Juvenile Sex Offender Day-Treatment; (6) increase our volunteers from 178 in FY 2010 to 248 in FY 2011; (7) implemented a "grand families" program to assist grandparents who are the primary caregivers of their grandchildren; (8) expanded contracted services for the Utah County Jail to include a full-time therapist; and (9) reached a contractual agreement with the Utah County Department of Substance Abuse to provide support for their Electronic Health Records system.

This next year will continue to present challenges and opportunities. The continued economic downturn will continue to present funding challenges. These will be even more amplified as the ARRA aid that mitigated some of the impact of the revenue losses in previous years has ended July 2011.

These challenges will require Wasatch Mental Health to seek innovative solutions to maintain or expand service capacity and meet the demands of our growing community.

We feel that the excellence, innovation, and resilience of our staff and management team will enable us to look forward to a successful 2012.

Sincerely,

Juergen E. Korbanka, Ph.D.



Juergen Korbanka, Ph.D.



Wasatch Mental Health

Excellence in Mental
Health Care

Providing Excellent
Customer Service

Embracing Wellness

Economic Stability

Employee Growth and
Development

State Mandated Services

- Inpatient
- Residential
- Day Treatment
- Case Management
- Outpatient
- 24-Hour Crisis
- Homeless Outreach
- Screening and Referral
- Consultation, Education and Prevention

Additional Services

- Mental Health Court Services
- Housing Services
- Pre-Vocational Training Employment and Rehabilitation Services
- Jail Medication Services
- Respite Services
- Nursing Home Services
- Autism Treatment
- Emergency Counseling and Shelter for Troubled Youth/Families
- Juvenile Receiving Center Services in Cooperation with Law Enforcement and the Juvenile Justice System for Evaluation/Triage and Referral Purposes
- Youth Sexual Offender Treatment
- Domestic Violence Treatment
- Wellness Recovery Clinic

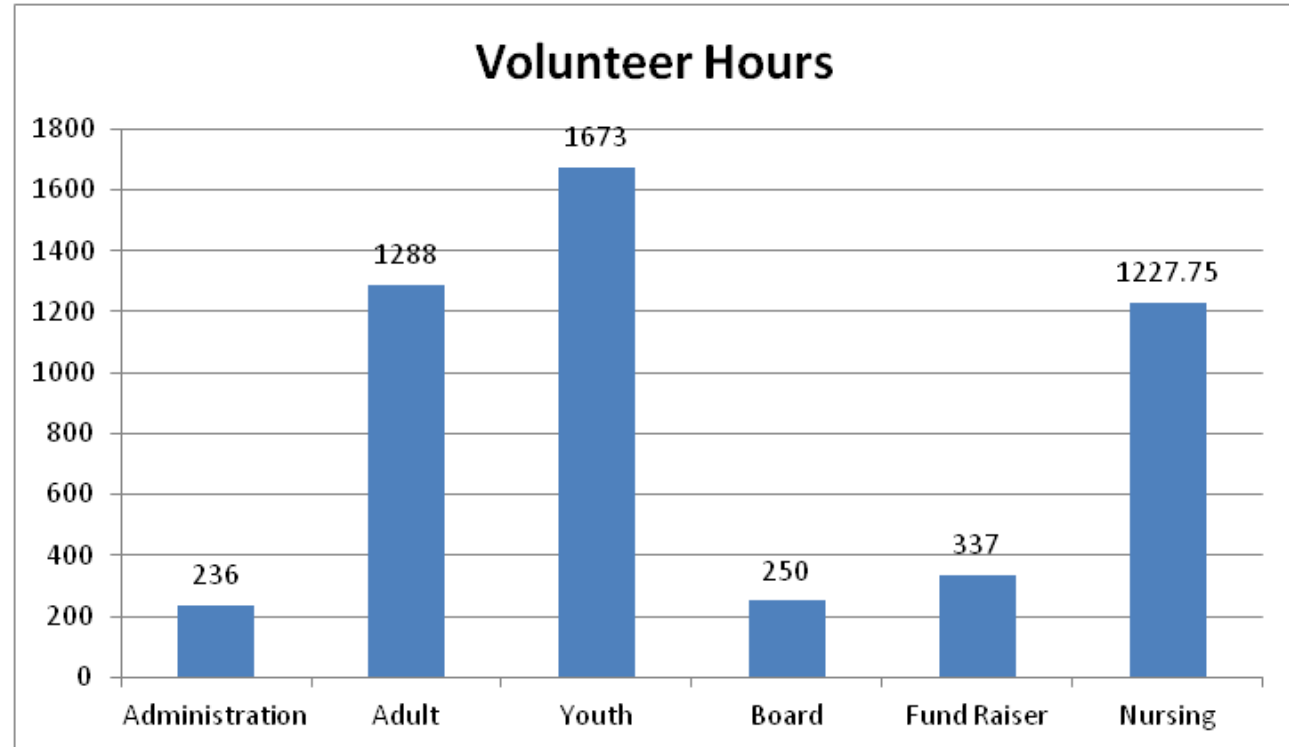
VOLUNTEER SERVICES

During FY 2011, 248 volunteers contributed 5,031.75 hours of service in eleven programs. Volunteers include students from BYU, UVU and the community.

Our "Friends of Wasatch Mental Health" Advisory Board donated 250 hours.

In FY 2011, the Advisory Board sponsored an Awareness and Wellness Run and Children's Fair, which included a 10k run, a 5k run and 1 mile walk. This is an awareness and fund raising event to educate the community, raise awareness and decrease the stigma of mental illness.

In FY2011 the Advisory Board's by-laws were reviewed and updated to include the sub committees for three areas: Friends of GIANT Steps, Youth Services and Adult Services. The Executive Committee consists of the Chair, Vice Chair, Sub committee Chairs, Sub committee Vice Chairs, Foundation officers, and WMH executive team. The Executive Committee held meetings on alternative months as the sub committee's grew.



2011 Citizens Advisory Board Executive Committee

Jeff Gehring—Chair
Sunny Todhunter—Vice Chair
Richard Peterson—Adult Committee Chair
Susan Reynolds—Adult Committee Vice Chair
Brenda Chabot—Youth Committee Chair
Alexander Gray—Youth Committee Vice Chair
Garold Jensen, Foundation Chair
Craig McAllister, Foundation
Don Fairchild, Foundation

Annual Report FY 2011

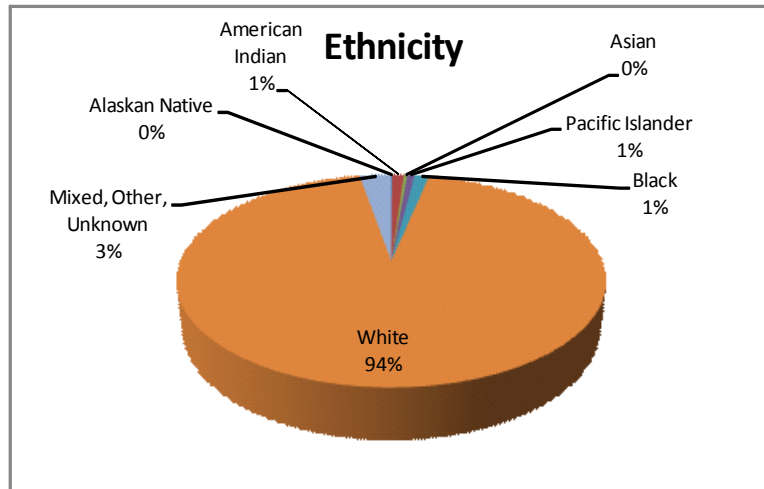
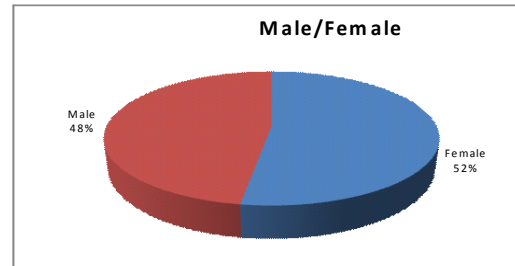
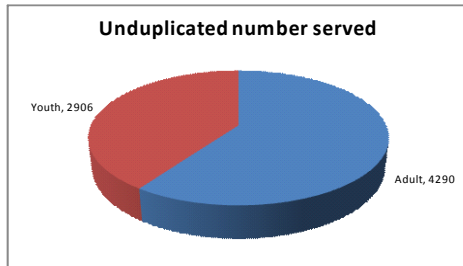
Center-wide Highlights

- Completed renovation of the Westpark Building to create an open and inviting client reception and waiting area
- The Westpark renovation allowed for consolidation of receptionists & support staff functions to streamline client flow
- We increased our volunteers from 178 in FY 2010 to 248 in FY 2011
- Implemented the “grand families” program to assist grandparents who have become the primary care-givers of their grandchildren
- Strengthened the Citizen’s Advisory Board by organizing the board into three standing committees
- Moved the mental health awareness and wellness 10K, 5K and fun-run to the City of Provo to allow for more participants
- Reached a contractual agreement with the Utah County Department of Substance Abuse to provide support for their Electronic Health Records system
- Developed a trust for post-retirement benefits to increase the security and stability of this benefit
- Purchased a 16,000 sqft office building in South Provo for future program and service expansion
- Relocated the Wellness Recovery Clinic at the new South Provo Building
- Relocated the Records Department at the new South Provo Building thus freeing up office space for service delivery at the Westpark location
- Expanded Jail Services to include a full-time therapist
- Participated in the organization of two 40-hour CIT academies (Crisis Intervention Training) for law enforcement personnel
- Transitioned the New Vista Residential Juvenile Sex Offender treatment into Day-Treatment program for Juvenile Sex Offenders

Center-Wide Goals for FY 2011

- Implement an acuity-based-care model to increase access to care and decrease barriers to services for Utah County residents.
- Explore opportunities to co-locate with a physical healthcare provider to more effectively address the health care needs of individuals with Serious and persistent mental illness (SPMI)
- Proceed with planning to build a comprehensive behavioral health services office building in Payson to better serve the residents in South Utah County
- Explore opportunities to co-locate with allied agencies in South Utah County
- Consolidate clubhouse day-treatment services and Lakeview day-treatment services into one comprehensive day-treatment program
- Enhance acute care services through expanding clinician availability for our crisis services
- Expand “Bridge” team services to assist clients maintaining in the least restrictive environment
- Implement a “FAST” team to assist clients transitioning from an inpatient or more restrictive setting into the community
- Offer mobile outreach/ crisis assessment services and enhance crisis stabilization services
- Implement an integrated payroll/HR software system to increase efficiency and services for employees
- Increase vendor base for inpatient services
- Expand Autism Services to kindergarten aged children

Demographic and Performance Data-Fiscal Year 2011



Performance Data for Fiscal Year 2011

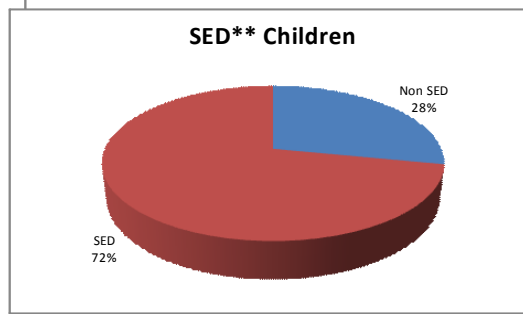
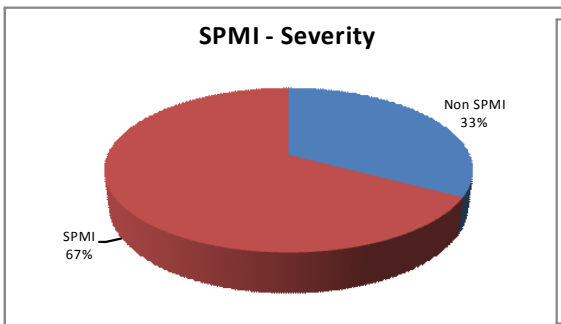
	TOTALS
Number of new Admits	4,360
Number of Patients Served (unduplicated)	7,196
Inpatient Admissions	262

TREATMENT (HOURS)

Evaluation	17,075
Individual/Family Therapy	39,107
Group Therapy	23,532
Med. Management MD (encounters)	13,017
Med. Management RN (encounters)	31,098
Skills Development/Adult	104,769
Skills Development/Youth	54,784
Behavior Management	25,584
Case Management	44,794

BED DAYS

Inpatient	2,689
Independent Housing	27,698
Adult Residential Supportive (SRT)	6,778
Adult Residential Intensive (IRT)	3,870
Vantage Point	2,371
TOTAL BED DAYS	40,533



* SPMI—Adults, identified as Seriously Persistently Mentally Ill (SPMI)

** SED—Children, identified as Seriously Emotionally Disturbed (SED)

FISCAL & ADMINISTRATIVE SERVICES



Wasatch Mental Health
Services
Special Service District

FISCAL AND ADMINISTRATIVE SERVICES

Executive Director
Juergen Korbanka, Ph.D.

Associate Director
Fiscal & Administrative Services
Todd Phillips, CPA

- Audit/Internal Controls
- Budget/Financial Planning
- Cost Study
- Investments
- Medicaid Monitoring
- State Reporting
- UBHN Financial Managers Committee

Financial Services Manager
Doralia Serrano-Castelan,
MBA

- Accounts Payable
- Accounts Receivable
- Payroll
- Pharmacy Billings
- Medicaid cost study
- Medicaid inpatient hospital eligibility & payment
- Medicaid eligibility reporting

Information Services Manager
Francis Quan, MBA

- Data Management
- Hardware/Software Support
- Internal/External Reports
- LAN/WAN Support
- Medicaid Monitoring/Data
- MIS Training
- Telecommunications
- Research/Evaluations

Supervisor
Medical Billing
Katie Johnson

- Claim Processing
- Collections
- Customer Statements
- Funding Compliance
- Insurance Denial Processing
- Insurance Eligibility
- Spendown Processing

FISCAL AND ADMINISTRATIVE SERVICES



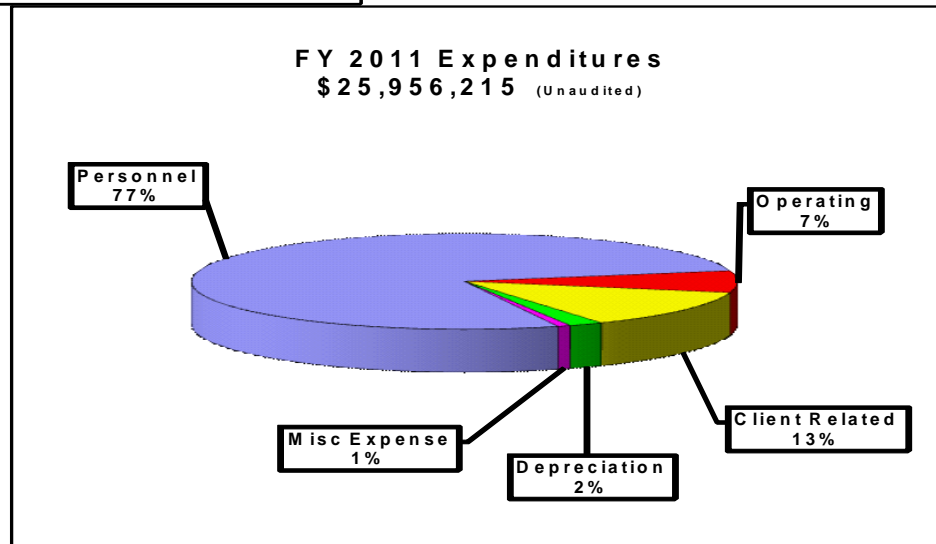
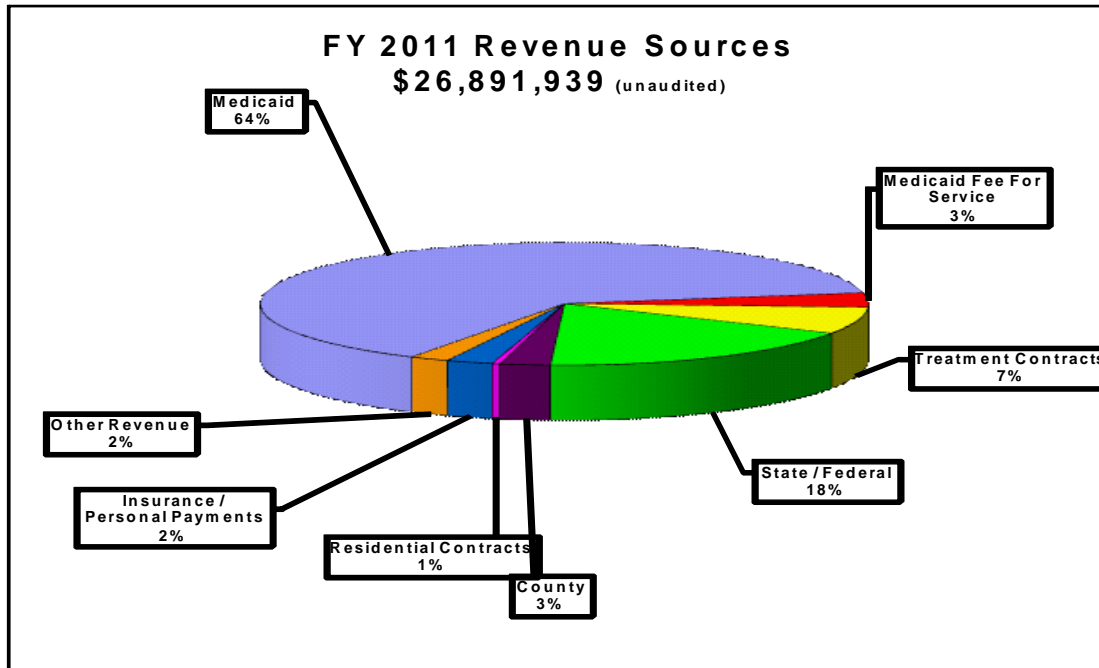
The Fiscal and Administrative Services Division is directed by Todd W. Phillips, CPA. This includes financial services, information services and medical billing.

Highlights and accomplishments during FY2011 included:

- Conducted a evaluation of electronic payroll/human resource systems. After comparing options, it was decided to continue with an updated version of the existing system. A new version of the software was installed.
- Installed and implemented a new version of our accounting systems software to allow us to move forward with our goal of paying more regular vendors through electronic funds transfer.
- Reached a contractual agreement to provide hosting and technical support of our electronic health records (EHR) system for an allied agency. We added the needed system capacity, helped with the system migration, and now support an additional provider organization.
- Continued development efforts in our EHR system with the implementation of a new skills development application and continued evolution to a web-based application with new assessment, client chart and diagnosis modules.
- Expanded the use of a trust for use in providing post-employment and medical insurance benefits for employees. This was funded with an additional \$689,802 to provide greater security for employee benefit programs.
- Independent auditors completed the FY2010 audit. An audit of the Medicaid cost study was also performed by an independent CPA firm contracted by the State Department of Health.
- An internal audit process that provides for review of 100% of written provider progress notes was expanded. Significant improvement in the quality and accuracy of written notes has been seen over the year.

Goals for FY2012 include:

- Increased involvement from program managers in monitoring and achieving financial budgetary results for individual programs.
- Implement an integrated payroll/human resource system to allow greater efficiency and increased level of service for employees.
- Identify regular vendors who would elect to receive payment through electronic funds transfer. This would decrease cost, reduce the risk of check fraud and allow vendors to receive their funds earlier.



CARE MANAGEMENT SERVICES

CARE MANAGEMENT SERVICES



Wasatch Mental Health
Services
Special Service District

Executive Director
Juergen Korbanka, Ph.D.

Associate Director
Care Management Services
Doran Williams, LCSW

Administrative Assistant
Leslie Olson

- Client Fatality Reviews
- Client Grievance Services

- Allied Agency Coordination
- Clinical Operations Oversight
- Community Education/Information Staff
- Continuous Quality Improvement (CQI)
- Corporate Compliance
- Development Training Oversight
- HIPAA Regulations
- Medicaid Policy and Procedure Compliance
- Strategic Planning

Medical Records Supervisor
Jan Hall, RHIT

- Admissions/Discharges/Transfers
- Disclosures
- HIPAA/Confidentiality Training
- Record Storage/Retention

Support Service Manager
Kent Downs, MA

- Administrative Policies and Procedures
- Facility Construction
- Facility Maintenance
- Fixed Assets/Inventory
- Policy Tracking
- Procurement
- Vehicle Maintenance

CARE MANAGEMENT SERVICES



Doran Williams, LCSW
Associate Center Director

The Care Management Services Department is directed by Doran William, LCSW, who oversees and manages the operations of WMH's Corporate Compliance Program and other compliance related matters. This includes:

- The development and implementation of policies and procedures to ensure that WMH is in compliance with state and federal laws and regulations.
- Overseeing all activities related to the development, implementation, maintenance of and adherence to policies and procedures addressing privacy and access to protected health information (PHI).
- Managing the Clinical Records Department to ensure the privacy and protection of all sensitive material and personal information.
- Providing leadership and participation in WMH's Quality Assessment and Performance Improvement Program (QAPI) that administers relevant activities necessary to deliver excellent service to members as well as compliance with the Division of Medicaid.

In addition, the Care Management Service Department oversees:

- Business contract development and oversight of delivery of service.
- Outside clinical providers utilization management services.
- Staff development and education training programs.
- Facility maintenance, construction and operations.

Goals for FY 12

1. We will continue to work on incorporating the Y/OQ outcome measure to improve the effectiveness of treatment and the relationship between the consumer and treatment provider.
2. We will continue to audit our documentations to ensure quality and timeliness of documentation.
3. We will continue to ensure that Wasatch Mental Health's (WMH) building, vehicles, and facilities are maintained and represent WMH in a positive manner.

ADULT SERVICES



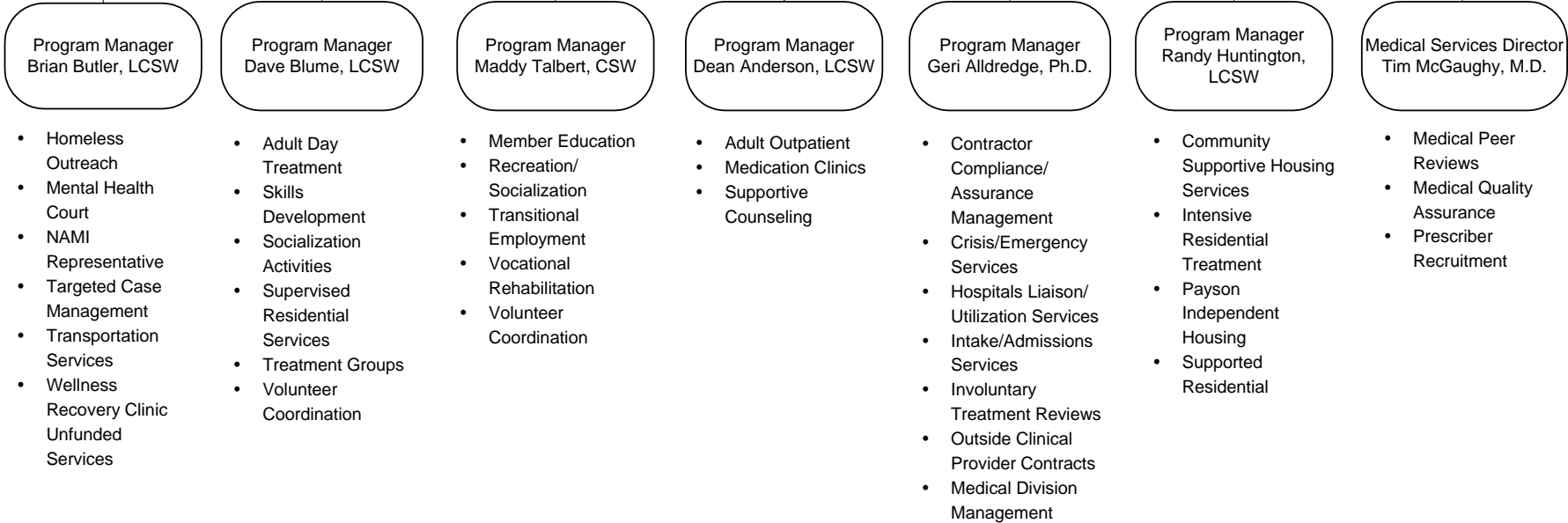
Wasatch Mental Health
Services
Special Service District

ADULT SERVICES

Executive Director
Juergen Korbanka, Ph.D.

Division Director
Adult Services
Lisa Schumacher, LMFT

Administrative Assistant
Mary Luis



ADULT SERVICES

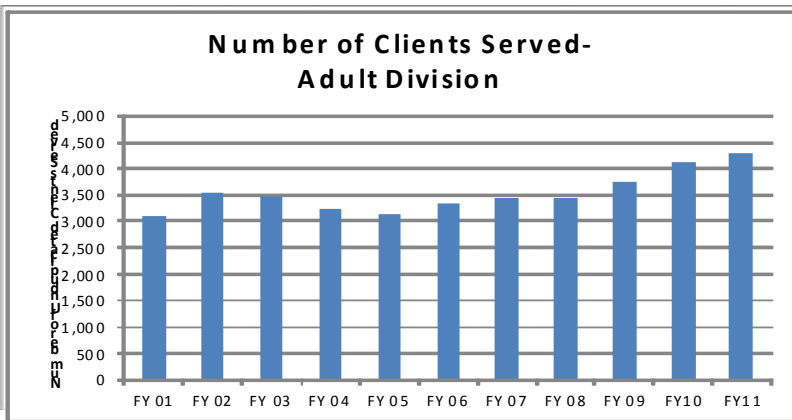


Lisa Schumacher, LMFT

Adult Services consists of the following programs:

- Adult Outpatient (AOP)
- Targeted Case Management (TCM)
- Homeless Outreach (WATCH)
- Wasatch House (Clubhouse)
- Adult Day Treatment (Lakeview)
- Supportive Residential Services (SRT)
- Intensive Residential Services (IRT)
- Mental Health Court Services (MHC)
- Wellness Recovery Clinic (WRC)
- Crisis Services
- Bridge team

Additionally, the Adult Division hosts and participates in regular coordination meetings with the following allied agencies to coordinate services and improve the continuum of care:



- Division of Services for People with Disabilities (DSPD)
- Utah County Substance Abuse
- Utah County Jail
- Utah County United Way
- Provo City Housing
- Housing Authority of Utah County
- Food and Care Coalition
- Department of Workforce Services
- Vocational Rehabilitation Services
- Project Reality
- Community Action

Service Data and Statistics – Adult Services

In FY 11, the Adult Division served 4,290 unduplicated individuals. This number includes the number of individuals who received services in the Wellness Recovery Clinic (WRC).

Fiscal Year 2012 Goals

The Adult Division plans to achieve the following goals during FY 2012:

- Develop an acuity based care model and begin implementing the model into our service provision. The goals of an acuity based treatment model are to assist clients in moving forward with their recovery and to provide appropriate services at the right time to help clients to meet their recovery goals.
- Decreasing client length of stays in Inpatient Psychiatric settings will continue to be a primary focus for FY12. Inpatient hospitalization episodes are very disruptive to the client's life, and while necessary at times to provide individual and community safety, it is also a very costly treatment option. In our continued efforts to provide excellence in mental health care to our clients in a cost-effective manner, we plan to monitor patient Inpatient stays closely, ensure that collaboration occurs regarding best treatment practices, and develop creative solutions for providing appropriate supports upon discharge.

ADULT OUTPATIENT SERVICES



**Dean Anderson, LCSW
Program Manager**

- * The Adult Outpatient (AOP) Clinic provides treatment to adults residing in Utah County. Licensed psychotherapists and counselors provide individual and family therapy, therapy groups, behavior management groups, and supportive counseling.
- * The Adult Outpatient program utilizes Master's and Ph.D. interns from several different Universities from across the Country. The Psychology Intern program has been a member of the Association of Psychology Postdoctoral and Internship Centers (APPIC) since 1988, and accredited by the American Psychological Association (APA) since 2004.
- * AOP is open Monday through Friday from 8:00 a.m. to 5:00 p.m. with extended evening hours Tuesday through Thursday.

FY 2010 Highlights.

- * AOP continues to provide outreach and consultation to other agencies and organizations in the county in order to build relationships and improve services. Recent efforts include: assisting with Head Start Screenings, making presentations to community and religious groups, presenting at the Brigham Young University Law School about Domestic Violence Treatment, attending DCFS staffing and coordination meetings, co-leading dual diagnosis groups with Utah County Substance Abuse, providing treatment and support to clients who live in nursing homes, participating on the local Domestic Violence Council, and working closely with DSPD providers to care for those with MI and MR diagnoses.
 - * AOP continues to augment services through volunteers. They are primarily assigned to assist clients with taking the OQ45 questionnaire.
 - * Assisted in staffing the Bridge Team.
 - * All contracts managed by AOP were utilized well with the available funds being exhausted in the last days of the Fiscal Year.
- * AOP therapists completed 71.7 new intakes per month with a total of 860 intakes for the year.
- * In FY 2010, AOP therapists carried an average collective case load of 880 clients at any one time. In FY 2011, AOP therapists carried an average collective case load of 929 clients. This is an average of about 60 clients per therapist.
 - * In FY 2011, AOP secretaries had 23,130 or an average of 1,929 per month contacts with clients at the check in window. The breakdown of these numbers are 14,590 per year and 1,215 per month on average who came to see the Therapists and 8,559 or 713 on average per month of clients who came to see the prescribers.
 - * During FY 2011, AOP collected an average of 1,157.91 OQ questionnaires per month and an average of 55.93 questionnaires per working day. In FY 2011, AOP collected an average of 1,183.67 questionnaires per month, and an average of 56.84 questionnaires per working day. This equates to an average increase of 25.73 questionnaires per month and 0.91 questionnaires per working day during the last FY.
 - * Re-evaluated the Walk-in Intake system to determine if it could be operated more efficiently. Data was gathered and analyzed and adjustments made to reduce the number of hours staff were available for intakes. This allowed more time for seeing regularly scheduled clients and still have sufficient hours available to cover the demands for intakes.
 - * Began scanning intake documents into the electronic chart.
 - * Attended the International Domestic Violence Conference in San Diego with two of our staff presenting at that Conference.
 - * Prepared for the clerical staff to move to the first floor to the remodeled area.
 - * Moved two Dual Diagnosis groups (MI/SA) to AOP from the WATCH Program.
 - * Worked on two committees to help build Acuity Based Treatments in WMH.

FY 2011 Goals.

- *All staff will reach their productivity goals.

- *Consistently reach the expected number of collected OQ-45s. OQ-45s will be given to every client every week and utilized as a therapeutic tool.
- *Continue to encourage recovery and client-centered treatment planning and service delivery as a healthy philosophy in working with clients on their challenges.
- *Complete Annual Assessments on every client.
- *Increase kept appointments by contacting all clients with upcoming appointments to remind them of their appointment time.
- *Contact individuals who missed their appointments to help them reschedule and learn if they need assistance or help getting to their appointments.
- *Secretaries will contact clients to help them schedule their Treatment Plan Review and Annual Assessments.
- *Implement Acuity Based Treatment changes.

Psychology Internship Program

Wasatch Mental Health's accredited APA Clinical Psychology Internship Program is a one year full time internship designed to prepare doctoral candidates for entry into professional psychology. The internship uses a local clinical scientist model that encourages the intern to develop as a generalist using an evidenced-based approach to clinical practice. Interns are supervised and assigned to concurrently work throughout the year in Adult Outpatient, Youth Outpatient, and Psychological Evaluation. In addition they participate in interdisciplinary team conferences. The program has been a member of the Association of Psychology Postdoctoral and Internship Centers (APPIC) since 1988, and accredited by the American Psychological Association (APA) since 2004.

TARGETED CASE MANAGEMENT



**Brian Butler, LCSW
Program Manager**

Case Management provides and coordinates services to assist persons with serious mental illness to optimize their adjustment and success in the community. Case Managers help to address not only the manifest symptoms of the illness itself, but also the psychosocial problems encountered by the individual, such as housing, transportation, obtaining financial entitlements, activities of daily living, employment, etc. Clients who receive targeted case management must meet the criteria for classification as being Seriously and Persistently Mentally Ill (SPMI.) During FY 2011, TCM provided case management services to an average of 387 clients per month. This is an increase of 20 individuals per month on average over FY10

WATCH PROGRAM (HOMELESS OUTREACH)

The WATCH program assists individuals who are homeless and chronically mentally ill to obtain adequate treatment (including: psychiatric care, therapy, and case management) and obtain adequate housing and other necessary services. In FY 2011, the WATCH program served an average of 86 individuals per month and provided 842 nights of emergency shelter to 84 homeless individuals through the Emergency Shelter Grant and Wasatch Mental Health monies.

The WATCH program has now been co-located with the Food and Care Coalition for over a year. By all accounts, it has been a great success. This exemplary community partnership allows the program to provide outreach and onsite mental health services to the patrons of the Food and Care, increasing access to needed services to this vulnerable population.

MENTAL HEALTH COURT

The Mental Health Court has been functioning in the Provo 4th District Court since 2004. On September 20th, 2007 a second Mental Health Court was inaugurated in the Provo City Justice Court. This additional Mental Health Court serves those who have been charged with Class B and C Misdemeanors.

The goal of Mental Health Court is to help to engage the participant in mental health treatment so that they are less likely to engage in criminal behaviors. Following a mental health screening for appropriateness, the mental health court offers a plea in abeyance agreement for clients charged with misdemeanors and some non-violent felony offenses.

Judge Samuel McVey of the Fourth District Court, and Judge Vernon “Rick” Romney of the Provo City Justice Court preside at the hearings which are held every Monday and Thursday afternoons respectively. Case managers and therapists track and report on each participant’s participation and progress in treatment to the court on a weekly basis. There has been a great deal of community support for the mental health court and dedication on the parts of those agencies and organizations that are working to make the mental health court successful. Data gathered continues to demonstrate cost-savings as a result of mental health court as shown by a decrease in jail bed days for current mental health court participants.

WELLNESS RECOVERY CLINIC

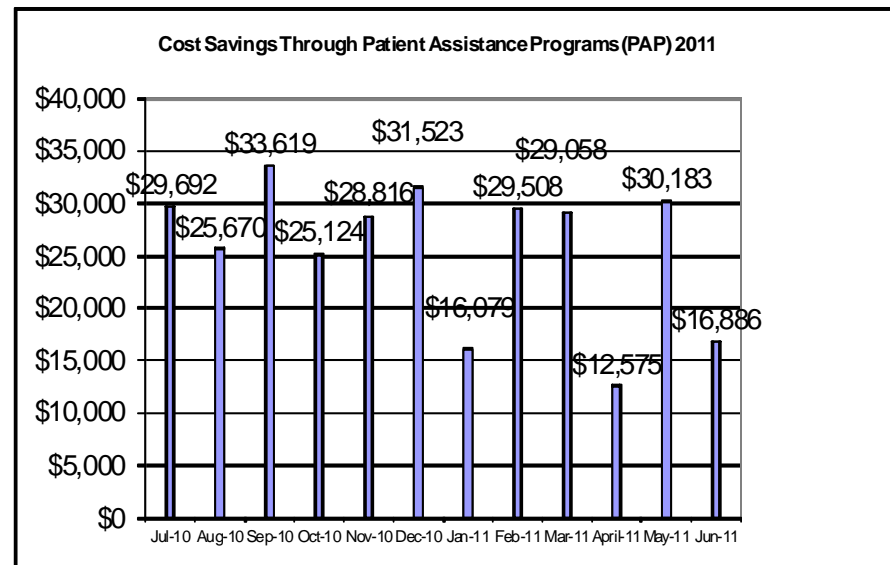
The Wellness Recovery Clinic is a no-fee clinic opened on July 1, 2005 to provide short-term mental health services to individuals in need who meet income eligibility guidelines and do not have medical insurance. In FY11 the WRC served a total of 619 unduplicated clients who were unfunded or underfunded

The Wellness Recovery Clinic provides the following services to clients on a short-term basis (90-180 days) to help to stabilize mental health symptoms:

- Intake Screenings/Assessments
- Group therapy
- Case management
- Psychiatric Evaluation/Meds Management
- Medication assistance.

Mid-year, the WRC was re-located to the recently purchased Wasatch Mental Health South Provo Building as a free-standing clinic. This is a realization of a goal set at the inception of this innovative and award-winning program.

The WRC has become expert in obtaining free medication for clients through the Patient Assistance Programs offered by the various pharmaceutical companies. The chart below illustrates the dollar amounts of medications that clients are saving on prescription costs as a result of linking them with this service.



RESIDENTIAL CARE AND SERVICES



Randy Huntington, LCSW
Program Manager

Supervised Residential Services*

Supervised Residential Services consists of several levels of supervision within a 54-bed apartment complex located in Payson, Utah. All of these apartments are shared housing. It is owned and operated by WMH. Housing services includes: house parents, case managers, daily pillboxes, and supervised independent living, traditional day treatment or the Clubhouse model of psychosocial rehabilitation. Supervised Residential Services is a continuation of Intensive Residential Treatment (IRT) and other programs to provide and practice daily living skills, self-care, and symptom management.

Alpine House*

Alpine House is a non-treatment, 18-bed, home-style facility with bedrooms and family meals for WMH clients. It is owned and operated by Utah County United Way. The 24-hour house parents are their employees. In addition, Wasatch Mental Health provides daily pillboxes, case management for each of the clients and requires clients to attend traditional day treatment or the Clubhouse model of psychosocial rehabilitation.

Independent Living*

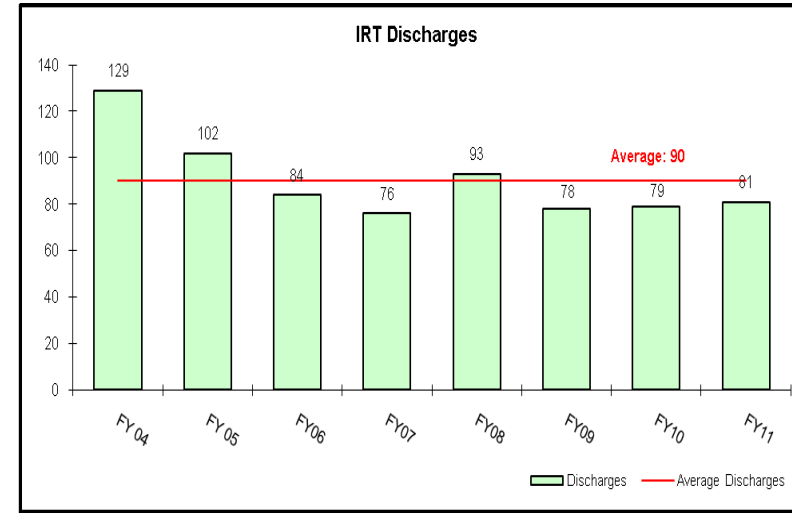
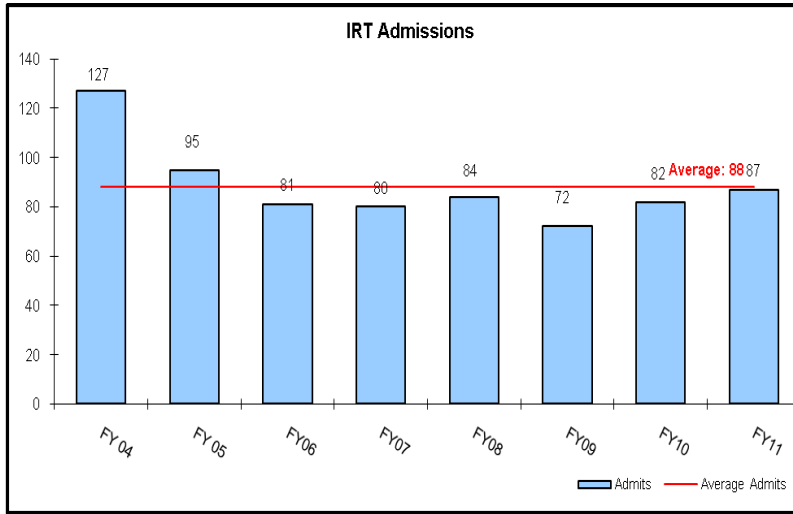
Independent Living consists of four non-treatment housing complexes. 1) Mapleview Apartments, a 24-bed apartment complex run by Provo City Housing, 2) Payson Independent Living Apartments, a 16 to 28-bed apartment complex owned and operated by Wasatch Mental Health, 3) Yarrow Apartments, a 17-bed apartment complex managed by Utah County Housing, and 4) Provo duplex (4-beds), Sunrise (6-plex, 11-beds), Sunset (4-beds) managed by Provo City Housing. Each of these apartment complexes has case managers assigned to monitor and tend to the clients needs such as money management, connecting with community resources, and general mental health care.

*These residential facilities provide non-treatment or quasi-treatment living for WMH clients.

Intensive Residential Treatment (IRT)

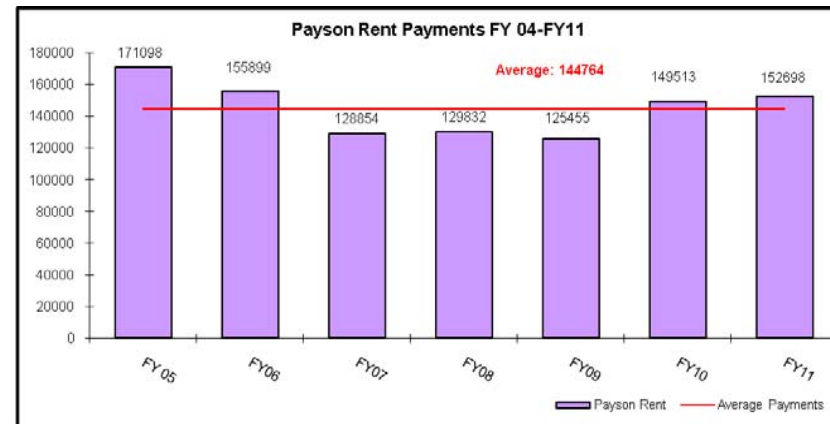
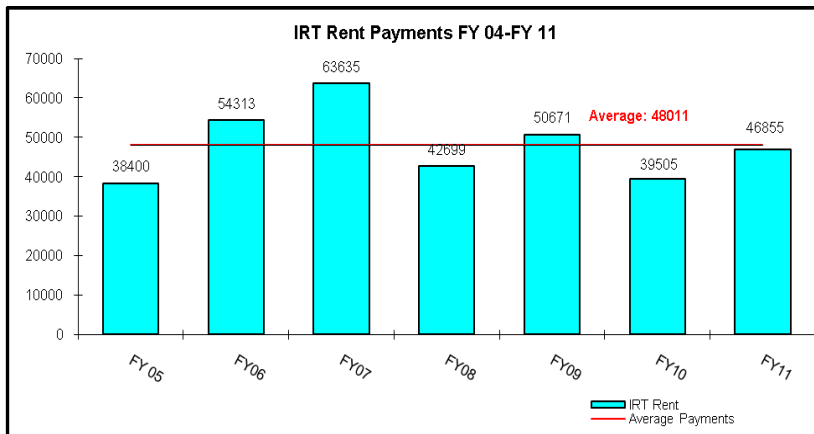
IRT is a residential care/treatment program designed to help people who suffer from chronic mental illness by providing resources, services, and opportunities as an alternative to hospitalization. It is a 16-bed co-ed adult residential facility serving ages 18 and older. Beds are typically available for 8 males and 8 females. IRT is staffed with awake personnel, including a nurse, 24-hours a day, 7-days a week. An array of services is provided including assessment, individual therapy, group therapy, skills development, case management, day treatment, medication management, and psychopharmacology. A psychiatrist makes rounds weekly and is available on-call, 24-hours a day.

The following statistics are supplied here to demonstrate the trends of admissions and discharges over the last eight fiscal years. The goal of all of residential care services is to treat the client in the least restrictive environment possible for both clinical and fiscal reasons.



Referrals for admission to residential care services come from various sources such as Inpatient facilities, the Utah State Hospital, crisis workers, sister agencies within the community and other departments within Wasatch Mental Health. Clients are transitioned out of IRT to their own apartments, Alpine House, SRT, Maple View residential, nursing homes, and to other living arrangements. IRT coordinates with Alpine House, Utah County Substance Abuse, Provo City Housing, University of Utah Pharmacy, and various other agencies in providing individualized treatment for each resident.

The following statistics represent the revenue that has been generated for 1) Payson apartments/Supervised Residential Treatment (SRT) and 2) Intensive Residential Treatment (IRT) over the last seven Fiscal Years. A slight increase in money collected in Payson will be noticed due to a lower vacancy rate. Additionally, you will see an increase in the monies collected at IRT; this is likely due to having a different population of people and we are getting better at working with case managers and family members to collect payments. Note that these statistics don't account for any expenses such as Questar Gas, electric, water, sewer, garbage, general maintenance and upkeep of the facilities. WMH pays for all of the utilities in both places.



LAKEVIEW DAY TREATMENT SERVICES

Lakeview is a specialized intensive day treatment program that provides skills development services to adults with mental illness. Many clients need assistance with learning coping and problem solving skills due to impaired judgment, difficulty communicating with others, and difficulty understanding their own illness.

Groups at Lakeview are designed to help clients increase their cognitive abilities, improve their social skills, enhance their awareness of the world around them, and learn basic living skills such as homemaking, personal hygiene, public transportation, and money management. We strive to improve the quality of life through awareness and skills development.

Lakeview participants come from a variety of different settings including: Intensive Residential Treatment (IRT), Supported Residential Treatment (SRT), Community Supported Housing (Alpine House), Specialized Rehabilitation (nursing homes), as well as individuals who reside independently in the community.

Lakeview is also an integral part of helping clients transition out of the State Hospital. Prior to their discharge, clients have the opportunity to attend Lakeview for a couple of weeks, to help ease the transition from the State Hospital back to the community. While at Lakeview, clients are given the opportunity to demonstrate their readiness for discharge.



Dave Blume LCSW

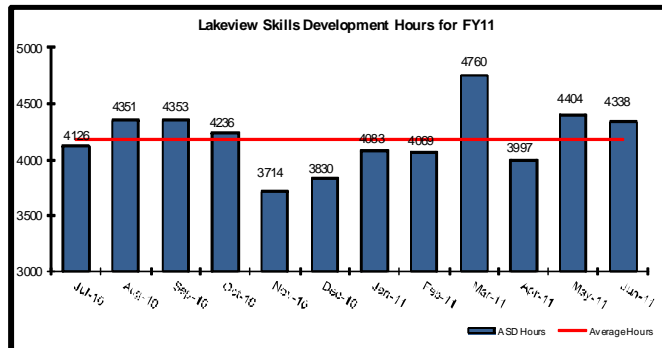
LAKEVIEW'S MISSION STATEMENT

Lakeview Treatment Center will provide quality day treatment services to consumers, which will help them understand, accept, and manage their mental illness. Consumers will have the opportunity to develop basic living and social skills that will enhance their quality of life and individual recovery.

Programming Highlights and Client Successes

In FY2011, Lakeview served a total of 194 individuals, with an average daily attendance of 56 clients, and a total of 50,261 hours of skills development that were provided.

Some successes from our program this past year



We had a very successful year implementing a wellness approach coupled with mental illness treatment. We have taught groups focusing on physical health where we were able to physically get the clients up and moving with exercise and an added component of diet education. These groups were offered each day along with a smoking cessation group where several people have either quit or significantly cut back on their tobacco consumption.

We have added several new groups with a new focus in specific areas. Specifically we have added an advanced cooking group as many of the clients know the basics but we have had a lot of interest to help with more detailed menu planning and meal preparation along with budgeting and shopping skills. We have also added a Healthy Relationships group to help clients develop and maintain relationships, all the way from interacting with landlords to significant others. We have added a Wellness Recovery Action Plan (WRAP) group, which is taking a bit of preparation and planning but seems to be taking off in a positive

way.

Lakeview conducted a survey of the needs and concerns regarding the UTA bus system. We worked very closely with several departments to assess what needed to be presented to UTA in behalf of our clients. We met with UTA and information was shared and we believe our clients were represented very well. Lakeview has done some training of staff from other departments to increase knowledge and exposure to UTA. This has helped as we have increased our focus on helping clients become more independent by utilizing the bus system.

Client success quote:

- “On a recent holiday, I was really missing my children. Not being able to see them that often had brought me great anguish. Every holiday I cry more than other days. This holiday I cried with tears filled with 2 emotions. One, of course, being missed and wanting to sing with them and color. Two, tears of happiness as staff played the piano and we all sang. Little did I know one year ago, I would be crying at Wasatch mental Health with a group of people suffering from mental illness. I was experiencing tears of happiness without my children for the first time. To find happiness without them is rare and I have learned it is okay.”

WASATCH HOUSE (CLUBHOUSE)

A place to come. A place of meaningful work.

A place for meaningful relationships.

A place to return. A place of recovery!



Maddy Talbert, CSW
Program Manager

The clubhouse approach to psychosocial rehabilitation, for adults with mental illness, is one of the fastest growing community-based programs in the world. The clubhouse model gained recognition this year as an *Evidence-Based Practice* and is included in SAMHSA'S national registry of evidenced based practice and programs. The clubhouse focus is on the strengths, talents, and abilities of its members instead of their diagnosis or limitations. Wasatch House provides a supportive environment which encourages members to improve the quality of their lives by staying on their medication, helping prevent hospitalization by encouraging members to become involved in wellness opportunities and the development of their talents and abilities through peer and staff support, job training, employment opportunities, and social skill development. The value of work is at the core philosophy of the healing process. Members work side-by-side with staff in the running of all the programs of the clubhouse. All clubhouse work is designed to help members regain self-worth, purpose, and confidence. Wasatch House is accredited by the International Center for Clubhouse Development. There are 9 clubhouse in Utah and over 350 worldwide.

We are in the second year of our new facility. This high-tech facility is equipped with a state of the art kitchen, exercise equipment, updated sound, video and computers, along with a large thrift store, business, and career and education room. Thanks to WMH, our Authority and Advisory Board, and many community donors and Foundations, Wasatch House is able to bring one of the best facility and equipment to our programming for adults with mental illness in Utah County and in the State.

Our wellness program continues to grow with over 40 members working out on our exercise equipment. We also have a healthy living forum that teaches nutrition and other health benefits. Our "biggest loser" and "clubhouse weight watchers" program has assisted over 30 members to lose weight. One member has lost 97 lbs. We are also having success with our tobacco cessation as 5 members have quit smoking. Our culinary unit serves healthy items at lunch on a daily basis and this "lighter side" has become the most popular item of the day.

Our Young Adult Program is focusing on adults between the ages of 18-35 to assist them in participating in needed mental health services. This group meets weekly to design programming for the younger population and has started a clubhouse band called "Side Effexs" to highlight the talents of the younger members.

Our "Stigma Busters" group has spoken to over 2,500 citizens in Utah County in the past few years as we educate the community on mental illness and the myths behind this disease. We are regular presenters at Brigham Young University, Utah Valley University and the University of Utah where we present at psychology and social work students.

In the past two years, our employment program has helped over 30 members get back to part-time work collectively earning about \$73,300.00. This is recovery at its best.



CRISIS DEPARTMENT



Geri Alldredge, Ph.D.
Program Manager

The Crisis Department is responsible for the following: 1) Daytime and After-Hours Crisis Services, 2) Inpatient Services, 3) Utilization and oversight management of outside providers, 4) Clients receiving treatment services involuntarily, 5) Crisis Intervention Team (CIT) training for local law enforcement agencies, 6) the Bridge team (intensive outpatient multi-disciplinary team) and 7) Utah County Jail mental health services.

Crisis Services

Crisis Services provide emergency services 24-hours a day, 7 days per week. Emergent and urgent care assessments are conducted; including walk-ins and phone calls from current Wasatch Mental Health clients and community residents needing care. If hospitalization is needed for stabilization, Crisis Services makes the appropriate arrangements. Involuntary commitment processes are also orchestrated through Crisis Services.

Inpatient

Inpatient services are provided by contract with local hospitals. They are the most restrictive and intensive resource offered by the center. Managing this important resource involves providing the most effective and efficient care possible. Inpatient services include 24-hour a day nursing assistance and supervision on a locked psychiatric ward. Daily programming includes psychotherapy groups, individual therapy, recreational therapy, and daily activities. Discharge planning meetings with family members and other individuals provide support to the client as they move to a less restrictive environment. The treatment team assesses and evaluates the client daily in a clinical staffing. All clients discharged from the hospital receive an outpatient plan that includes follow up appointments.

Contracted Provider Management

Wasatch Mental Health maintains a provider network of licensed private practitioners in the fields of Psychiatry, Psychology, Social Work, Marriage and Family Therapy, and Professional Counseling to meet the needs of clients who cannot be served within the center.

Involuntary Commitment

Crisis Services maintains a listing and oversees the service to court-committed adults, including tracking their progress in treatment and providing regular reports to the court on each client's progress. A monthly court commitment review meeting is held to ascertain whether clients up for review should remain court committed, be allowed to discontinue services on a voluntary basis, or be offered continued services on a voluntary basis.

Crisis Intervention Training (CIT)

Crisis Intervention Training is an international program orchestrated and supported by the State of Utah with a local partnership between Orem Public Safety and Wasatch Mental Health. Officers participate in forty hours of training on mental health issues. The training is comprised of classroom instruction, direct interaction with individuals who have mental illnesses and scenario training with actors. The instructors come from agencies in the community that deal with mental health, aging, disabilities, and substance abuse services. The main goal of the academy is to promote understanding, empathy and skill building for law enforcement officers dealing with mentally ill individuals and their families.

Bridge

The Bridge program was created to provide more intensive outpatient services for individuals transitioning from inpatient care to less restrictive settings and to individuals needing more intensive services to remain stable in the community. The Bridge program is based on an Assertive Community Treatment (ACT) model of care but has been tailored to meet local needs. The Bridge staff is comprised of a multi-disciplinary team who provide services in the community as well as at the mental health facility.

Utah County Jail Mental Health Services

Wasatch Mental Health contracts with Utah County Sheriff's Department to provide mental health services at the Utah County Jail. Wasatch Mental Health provides two medication clinics a week for inmates requiring mental health services. Wasatch Mental Health also has a full time social worker who provides direct care to inmates and serves as a liaison between the two organizations to coordinate care during and after incarceration.

Utah State Hospital Management

A staff liaison with the Utah State Hospital facilitates admissions and discharges from the hospital, as well as monitors progress during the patient's stay in the hospital. The average length of stay for a patient referred by Wasatch Mental Health to the USH is approximately nine months. Patients may only be admitted to the Utah State Hospital by Wasatch Mental Health, or in the case of a forensic patient, by a Utah State District Court Judge.

Highlights for FY 2011

- Preliminary outcome data has been gathered and suggests that The Bridge team is effective in preventing a reoccurrence of inpatient hospitalization for clients being served by the team.
- Expanded services at Utah County Jail that included a full time clinician who provides direct care to inmates and serves as a liaison between the two organizations to coordinate care during and after incarceration has been very successful.
- The legislature passed a bill last year strongly encouraging all law enforcement officers to receive CIT training. The CIT academies had large enrollment numbers and included law enforcement agencies that had not participated previously.
- There has been a shortage of inpatient beds in the State of Utah. There are now adequate beds and Medicaid has changed the contract with WMH to allow access to free standing psychiatric facilities to better accommodate the needs of Medicaid enrollees in Utah County.

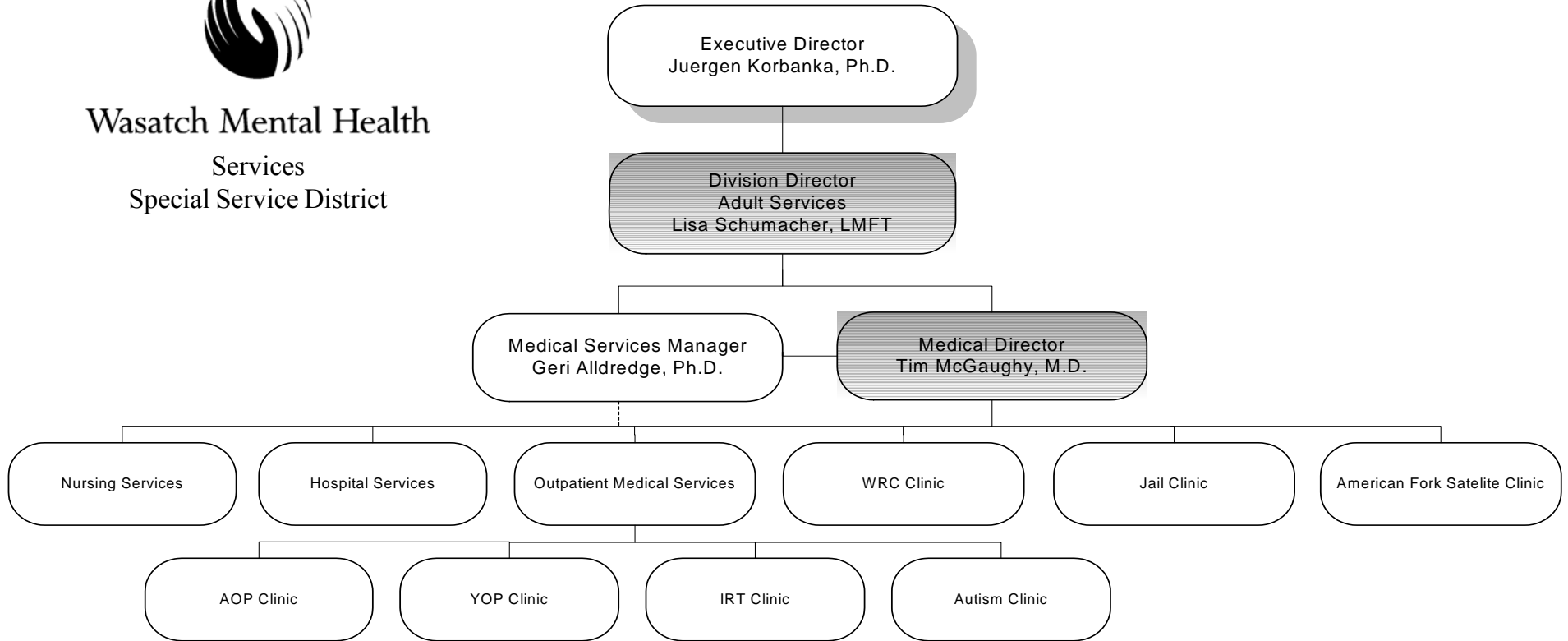
Goals for FY2012

- Additional outcome measures have been identified and are being implemented for the Bridge program. The goals are to measure quality of life, progress in recovery and readiness to move to another level of care.
- Expansion of the Bridge Team is being planned and will include more intensive services for individuals with acute needs.
- Continue outreach contacts with local law enforcement agencies to provide support and education regarding mentally ill individuals.
- Continue co-sponsoring the CIT program
- WMH is creating contracts with several inpatient psychiatric facilities to better meet the needs to clients in acute crises.



Wasatch Mental Health
Services
Special Service District

Medical Services



Nursing Services

Nursing services are an integral part of the medical department. Nurses monitor medical vital signs, coordinate care with other providers, work with prescription refill needs and provide clients with essential information regarding medical mental health needs.

Medication Management Services

Staff psychiatrists and APRN's provide medication management services to Adult Outpatient, Youth Outpatient, Intensive Residential Treatment, Homeless Services, Wellness Recovery Clinic, New Vista Residential Services, Nursing Home Services, Vantage Point Services, and Autism Services. Medication management services are an important and integral part of treating the mentally ill to help ameliorate negative symptoms. Patients whose symptoms are adequately stabilized through medication management, experience better quality of life and personal independence in the community, and are less likely to need inpatient hospitalization. Medical clinics are offered during evening hours to accommodate client schedules.

CHILDREN AND FAMILY SERVICES



Wasatch Mental Health
Services
Special Service District

CHILD AND FAMILY SERVICES

Executive Director
Juergen Korbanka, PhD.

Division Director
Child & Family Services
Catherine Johnson, LCSW

- Bachelor & Masters Internship Liaison
- Stengthening Families Program

Program Manager
Colleen Harper, LCSW

- Nursing Services
- Youth Case Management
- Youth Outpatient
- Spanish Fork Family Clinic
- Utah State Hospital Liaison
- Division of Human Services

Program Manager
Bryant Jenks, MFT

- American Fork Family Clinic
- School-base Services
- Youth Case Management
- Grandfamilies Program

Program Manager
Greg Robinson, LCSW

- Youth Extended Day Treatment
- GIANT Steps - Autism

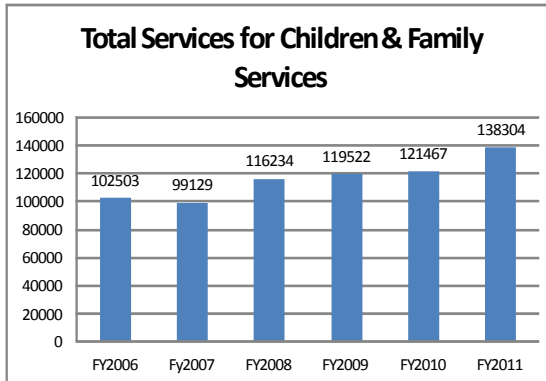
Program Manager
Scott Taylor, LCSW

- Division of Child and Family Services Shelter
- Stride
- Juvenile Receiving Center
- Vantage Point Youth Service Center

CHILD AND FAMILY SERVICES—CFS



Catherine Johnson LCSW
Director



CHILDREN AND FAMILY SERVICES (CFS) consists of the following programs:

- 1 Youth Outpatient (YOP)
- 2 GIANT Steps Autism Program (GS)
- 3 New Vista Day Treatment Program (NV)
- 4 Family Preservation Services (DHS)
- 5 School Based Services (SBS)
- 6 Stride
- 7 Vantage Point (VP)
- 8 American Fork Family Clinic (AFFC)
- 9 Spanish Fork Family Clinic (SFFC)

CFS hosts and/or participates in regular coordination meetings with allied agencies, school districts, police departments, local physicians, housing organizations, juvenile court, and universities. CFS collaborates with DCFS and Juvenile Court Judges in providing the Strengthening Families program.

Fiscal Year 2011 Highlights

- Increased ability to provide services in our American Fork and Spanish Fork Clinics, including case management and prescriber services.
- American Fork and Spanish Fork clinics were able to improve their waiting room atmosphere to facilitate happier clients.
- Collaborated with IHC and Provo School District to provide services through the Dixon Integrated Clinic.
- Collaborated with United Way to implement the Grandfamilies Program.

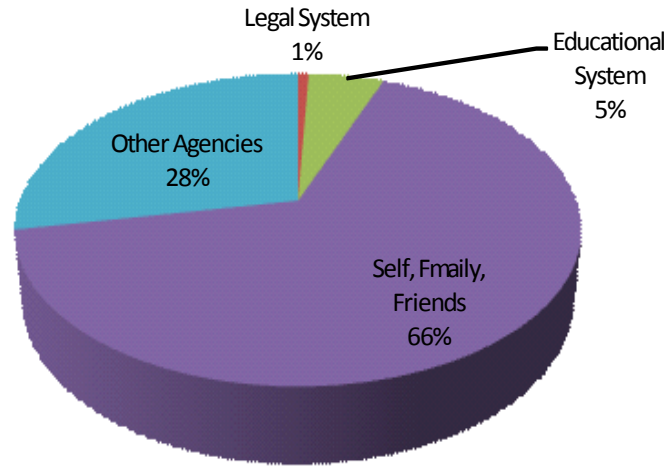
Fiscal Year 2011 Goals

- Youth Services will develop a treatment track program to address specific needs of clients and their families based on practice based evidence.
- Youth Services will implement an acuity based care model to better treat children and families.
- Youth Services will implement peer support services.
- Youth Services will develop and implement wrap around services to meet the needs of children and families in crisis.
- Youth Services will look at how to increase the penetration rate of the youth aged population who is in need of mental health treatment.

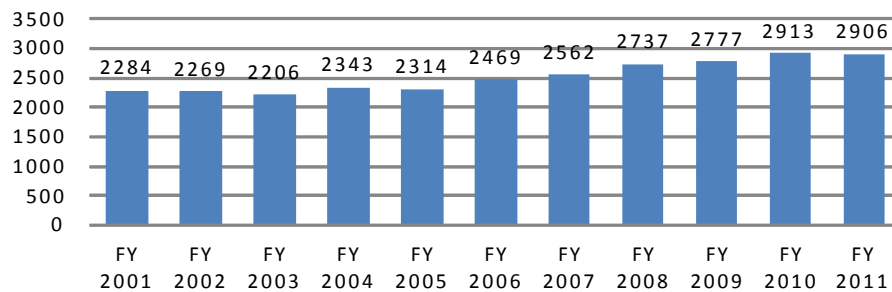
CHILD AND FAMILY SERVICES

The following information shows services provided to clients by type and hours/units of service delivered to clients in the Children and Family Services.

Referral Source at Time of Admission



Number of Unduplicated Clients Served in Children and Family Services



Service Type	Hours/Units
Evaluation/Psychological Testing	4,394
Individual/Family/Therapy	21,643
Group Therapy	9,360
Med Management MD (Encounters)	2,423
Med Management RN (Encounters)	2,637
Skills Development—Children and Youth	43,563
Behavior Management	24,309
Vantage Point Services	564
Case Management	7,895
Treatment Plan	2060
Respite	9633
Day Group	9823
Bed Days	Days
Vantage Point	2,363

YOUTH OUTPATIENT (YOP) SERVICES



**Colleen Harper, LCSW
Program Manager**

Wasatch Youth Out Patient (YOP Provo) Services

YOP provides the following services to children ages' birth to eighteen years old

- Assessments
- Psychiatric Evaluation and Medication Management
- Individual and Family Therapy- (including but not limited to: cognitive behavioral therapy, Trauma Focused cognitive behavioral therapy,, EMDR. motivational interviewing, structural family therapy, play therapy, sand tray therapy & attachment therapy)
- Group Psychotherapy- parenting, Dialectical Behavior groups, and others
- Psychological Testing
- Case Management Service and behavioral management

Common issues therapists' treat are attention deficit disorder, behavior problems, depression, anxiety, posttraumatic stress and traumas. Trauma may include death of a parent or sibling, divorce, domestic violence, abuse, out of home placement, reunification with parents, and adoption related issues.

Highlights

- Many employees received positive comments and recognition from the Division of Child and Family services yearly satisfaction questionnaires.
- There were 385.25 hours of service provided by 18 volunteers.
- Intakes were changed from appointments for intakes to walk in clinics.
- The computer program Junction was made more user friendly this year.
- Below is the appointment data for the year.

One success story of many:

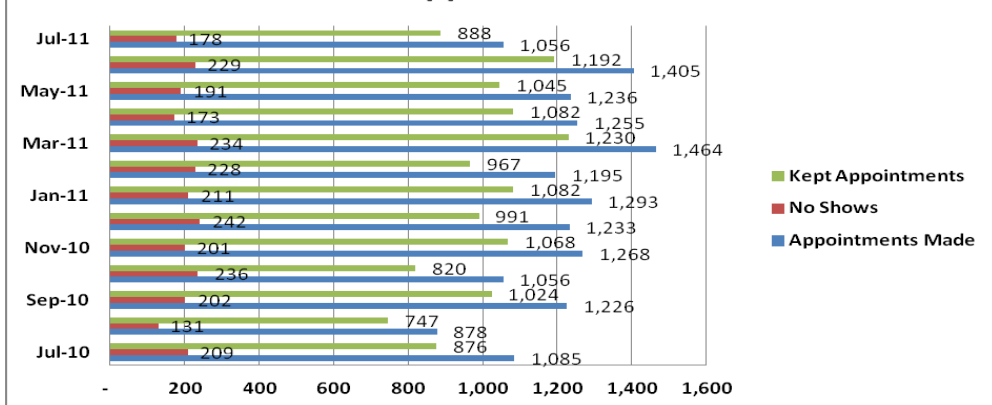
One of our therapist's reports:

A client, who I have been seeing for awhile, is really doing well. She used to steal and lie. She is in the process of paying off her fine to the school for stealing. She has decreased her arguing and fighting with her mother and dad. She is getting really good grades and she is accepting that she is in charge of her success. She has been able to learn to listen and negotiate appropriately. She has learned how to express her feelings with family members and sometimes that is very challenging. She has made great progress!! I am so proud of her.

Goals for 2012:

- Have 90% of therapist meet there productivity expectation.
- Increase wrap around services for children and youth at risk of out of home placements
- Increase Medicaid penetration rates

Provo Appointment Data



Spanish Fork Family Clinic

The Spanish Fork Family Clinic of Wasatch Mental Health provides a broad spectrum of mental health services for children, families, and adults. We offer a variety of therapeutic services designed to help those who are affected in some way by mental illness.

Our clinicians are trained to work with a variety of conditions including depression, anxiety, OCD, child & teen behavior problems, ADHD, post-traumatic stress, sexual behavior problems, and autism spectrum disorders. We also provide services to help with divorce adjustment, post-adoption issues, domestic violence, and abuse.

At the Spanish Fork Family Clinic, treatment providers utilize a number of effective, researched-based techniques that help family members meet their goals and recover from the effects of their emotional difficulties. Some of these techniques include the following:

Family Therapy Individual Therapy Group Therapy Psychological Testing Case Management Medication Management

Currently, our clinicians include Clinical Social Workers, a Marriage and Family Therapist, and a Resident Psychologist who employ therapeutic interventions based on CBT, Solution Focused, EMDR, and Attachment oriented models. Medication management personnel and case managers who work with both children and adults are also available and on site.

2011 Program Highlights

- A therapist from our clinic had the opportunity to present at the Mental Health Awareness Night. At that conference, a large number of community leaders and gatekeepers were able to gather information on mental health issues and steps to helping the people they work with receive needed treatment.
- Medication management services increased in our clinic. Currently, we have a prescriber for adults and another prescriber for youth. Each is on site one day per week and may increase soon as demand grows.
- One of our therapists was able to become trained in EMDR to meet the demand from community partners for this kind of therapy technique. Referrals for EMDR treatment have increased and have shown positive results. Overall, referrals from other departments and community partners have increased for many of the therapeutic services we provide.
- Nursing home services have increased. Training to nursing home staff members regarding diagnoses and other mental health issues has occurred to improve the quality of treatment with a team oriented approach. Our nursing home liaison has worked to build a good rapport with nursing home staff and clients. Referrals from this source have increased significantly.
- Our relationship with DCFS continues to grow and have positive results. Caseworker and therapists are often seen staffing cases and working together toward solutions for the clients with whom they work. Despite certain constraints on time, our therapists continue to attend a large number of child and family team meetings in order to foster the team approach and provide the best possible quality of care. Trainings for caseworkers on diagnostic issues and appropriate treatment modalities have occurred and more will likely occur in the following year as they have been successful thus far.
- To continue with our ongoing goal to make our customer service experience be as pleasant as possible, our clinic was able to make a number of improvements and upgrades to our waiting room, hallways, and offices. Feedback from clients about these improvements has been positive thus far and has included statements that describe a feeling of increased warmth and welcoming atmosphere.

- We were also able to add more case management time for adults in our clinic. Additionally, we now have a marriage and family therapist on site once per week who offers specialized therapy for couples and families as needed. A part time secretary was also approved to help meet the high demand for clerical services.

Goals for 2012

- Improve outcome data by increasing the number of clients who are discharged with Treatment Completed status.
- Enhance treatment efficiency by reducing the percentage of clients who have been open for services longer than one year.
- Further increase the number of professionals and others who are aware of the services we provide.
- Provide more treatment options tailored to issues that include teen behavior problems.
- Increase the amount of education for our clients about mental health issues and evidenced based treatment options.

The Spanish Fork Family Clinic has seen further expansion this last year in response to needs in South Utah County. It is housed in the same building as the Division of Child and Family Services and DSPD. Currently there is a secretary there, three full time therapists and a psychology resident. A medication prescriber has started to have office hours there twice a month and will expand as the need grows. A supervisor also has office hours there and we have a twenty hour intern for fall and winter. As the clinic grows it will serve more of the needs of children and adults.

American Fork Family Clinic



Bryant Jenks, LMFT
Program Manager

The American Fork Family Clinic is a part of the Children and Youth Services division of Wasatch Mental Health. We provide a variety of services for adults, youth, and families in northern Utah County. We also provide services for families under the care of the Division of Children and Family Services. Services include the following:

FAMILY AND INDIVIDUAL THERAPY

MEDICATION MANAGEMENT

PSYCHOLOGICAL TESTING

GROUP THERAPY

CASE MANAGEMENT

Therapists

AFFC therapists come from a variety of educational fields of study with different expertise. There are clinical psychologists, clinical social workers, marriage and family therapists, registered play therapists, trained sand tray therapists, and certified trauma and loss counselors on our staff. The therapists' expertise includes working with a variety of diagnoses such as bipolar disorder, major depressive disorder, anxiety disorders, obsession-compulsive disorders, attention deficit hyperactivity disorder (ADHD), oppositional defiant disorder, and conduct disorder, etc. Other areas of expertise include work with divorce adjustment, blended families, trauma and loss, sexual abuse, sexual reactivity, physical abuse, adoptive children and youth, children witnessing domestic violence, perpetrators and victims of domestic violence, foster-care reunification, and parenting.

Medical Staff

AFFC medical staff includes registered nurses, an adult psychiatrist, and a certified child psychiatrist. Their expertise helps our department to be on the cutting edge of medication treatment for adults, children and youth with mental illnesses.

F.Y. 2011 Highlights

- AFFC, for the first time, broke the 400 mark with the number of unduplicated clients. Of particular note is that the number of adult clients attending continues to climb and narrow the gap with the number of children seen. (164 adults vs. 240 youth).
- In our first year of operation 2009-2010, the total number of unduplicated clients served was 850 (316 adults, 548 youth). In the 2010-2011 fiscal year, we had a total of 1031 unduplicated clients (385 adult, 660 youth). We continue to increase in the amount of people we are serving.
- AFFC was the beneficiary of an Eagle Scout Project where 72 school kits were assembled to give to our Medicaid children who are starting school soon. The kits included items like child-safe scissors, a ruler, pencils, a pencil sharpener, colored pencils, glue, and notebooks. These supplies were placed in a nice bag that can be worn like a backpack. They were given to school age children attending the American Fork Family Clinic and received with smiles.
- As we have been working on improving our customer service this year, we want to highlight how helpful it has been to improve the location of the AFFC services. Jill Robinson has summarized some of the feedback we have received about the waiting room and check-in area: "Since we moved to this side of the building we have had so many compliments on our new location. People are less stressed out when they come in because there is only one entrance instead of two. They don't have to switch waiting rooms if they are seeing the doctor and therapist back to back. There is more room and they feel like they can breathe. They love the decorations and the homey feeling it has. They really like that the kids can color AND watch a movie instead of choosing one or the other like when we had two waiting rooms. Also, the secretaries share a window so they can go to either secretary. Pretty much the atmosphere is now a lot more welcoming and relaxed. Everyone is less annoyed and a lot happier with us."
- CHADD, and advocacy group for helping parents who have children with ADHD, has partnered with AFFC to hold parent support groups at our facility. We are excited to give this a trial run and to include the families in our services with these classes.

Feedback from Allied Agencies and Clients

We met in our now semi-annual focus group meeting in October. Some in the group have been working for both agencies for many years and noted how the collaboration and consultation has vastly improved from years ago. **DCFS expressed appreciation for the regular meeting to keep this relationship maintained. They also highlighted how quickly concerns and problems get resolved between the two agencies when they arise.**

Wasatch Mental Health has had success this year in supervising MFT intern from Argosy University. John Robbins, PhD., Director of Training, sent the following expression of appreciation: “I just wanted to say thank you for your continued support with Argosy by offering your experience to supervise and train our students.”

The American Fork office continues to have success with Child-Parent Relationship Training class. The following successes were shared about attendees: “I was very unsure if this class would work at all, but I noticed a huge difference after the 1st week & now going into week ten my son’s & my relationship is 100% better. Thanks to Sheri [Rowley], Barbara [Bronson], & CPRT. I recommend this class to every parent.” Here is another comment on the class: “I feel the CPR Training has helped me enjoy being a parent. Before I came to class I really didn’t like my role as parent and I felt my child could feel how I was feeling. Now my child seems so much happier and more loving. I feel like this change is because I have developed the skills I need to be a better parent and to develop a loving relationship with my child. I now love being at home with my little girl where before I hated it. Thanks for having the class.”

A parent of youth that Scott Downs sees reported the following as summarized by a secretary: “She commented on how wonderful Scott has been and how great it has been for her daughter. She said it has made a life or death change for their family (and she said she was not kidding, it really has). She just wanted to let us know how much they have enjoyed working with Scott and how much help he has been to their daughter.”

We received a complimentary Holiday greeting card from one of our former clients who moved to Oklahoma. She writes: “...you have an awesome team and their support above and beyond really works. Thanks.”

SCHOOL BASED SERVICES

School Based Services has the goals of providing community based, family centered comprehensive mental health services on an out patient basis to children and their families in their natural setting which is school and/or home. The goal is to intervene early in the course of mental illness to minimize the trauma to children and their families. They are treated in the least restrictive environment in an effort to improve quality of life. Children ages three through eighteen years may be seen for psychiatric evaluation and medication management. Licensed therapists provide assessment, individual therapy, group therapy, and family therapy. School Based Services has experienced therapists who can work with the broadband of disorders that present in children and youth. School Based Services is a training site for social work interns.

School Based Services also provides case management services. The primary function of School Based Case Management is the coordination of services with the schools and outside agencies and service providers; the linking of services with outside agencies and service providers; and the monitoring of services and progress within Wasatch Mental Health and with the schools, outside agencies and service providers. Case managers provide services in a child's home, at school or in a clinical setting; for children who have been released from Utah State Hospital, case managers provide transition services in assisting them back into the community.

F.Y. 2011 Highlights

- In one of our contracts with Student Services in the Alpine School District, the year end report was published reflecting the hard work of Roger Stubbs, SSW, and the other ASD social worker in responding to referrals of students with various needs. They responded to 512 referrals throughout the last school year.
- SBS received a donation of 120 bags with back-to-school supplies for our Medicaid youth. We want to thank Latter-Day Saint Charities for their donation. This helped many children get off to the right start with their basic supply needs this school year.
- School-based Services applied for a grant to provide services to families in collaboration with the Dixon Middle School and the IHC Dixon Medical Clinic in Provo. Wasatch Mental Health was one of two sites chosen to receive \$45,000 to be used in behalf of families and youth in need regardless of their socio-economic status.
- The Alpine School District ED teachers and administrators met with the School-based team assigned to the district. They reviewed policies and rules to help them all work as an effective team this new school year. We had great representation and a good experience with this coordination meeting. The district has indicated they would like to have this meeting every year at the start of the school year.
- In the Alpine School District newspaper Roger Stubbs, SSW and WMH case manager was featured for the good work he does. Roger is consulting with teachers and principals about child abuse and neglect, acting as a liaison between the school and DCFS, and helping resolve issues for children who are not attending school regularly. He is also helping with the Kids Cause project in the area to help needy children.
- The Nebo School District met with Doran Williams, Catherine Johnson, and Bryant Jenks to discuss future needs and desires of having school based mental health services more available in their district. The district officials were pleasantly surprised what we are already doing to meet with Medicaid youth in their area. A Memorandum of Agreement is in the process of being completed.
- The School Based Services program, under the direction of Kathy Farmer, teamed up with two BYU wards this Holiday season to provide Sub-for-Santa help to youth we serve. This has become a wonderful annual event where an auction is held by the students to raise money, and then the students go out and buy the gifts, and finally they wrap them. It is quite a sight to see, and the students have a lot of fun. This year we were able to have 66 youth served through this program.
- The Grandfamilies program got off to a good start on February 24th. The adult class has 9 attending and the children's class has 5. The adult participants showed a lot of excitement in being able to share commonalities and have others relate to them in their experiences with raising grandchildren. The program is for a total of 10 weeks. Sarah Williamson, LCSW and coordinator of Grandfamilies, reports another class will start up in May. Community partners and staff from WMH are demonstrating excitement about the program and are sending referrals in weekly.
- The Grandfamilies program was able to get television exposure. Sarah Williamson, therapist, was interviewed on Fox 13's program Good Day Utah (weekend edition). The Fox 13 reporter quoted from the census numbers taken in the year 2000 that over 40,000 children in Utah are living with relatives. During the rest of the program, questions were asked about the Grandfamilies services and how to access it. We are excited about the opportunity this gave us to advertise.

Feedback

Here are some positive comments regarding our SBS Summer Program: What some caregivers (of children) said (as reported by the staff): "1. they don't know what they would have done with him at home all summer, 2. he learned a lot of things and they reported improvements in his behavior." Another parent reported that her child was an "angel" by the end of the program.

Kyle Bringhurst, Kathy Farmer, and Sara Shirley completed the Teen Group for boys who are on the Autism/Asperger's spectrum. They noted the following successes: "One client was able to go back to school after being gone for a year and a half because of his anxiety and social problems. This client was able to take 3 classes a day and has been able to stay in his classes. He also made vast improvements in his communication skills with teachers and peers. Another client was able to stay out of the State Hospital and has worked his way off the small group class room and attends two mainstream classes. His mom has mentioned numerous times about how much better he is doing getting along with his siblings and peers at home. All of the clients have been able to improve their functioning at home, school, and in the community. Parents have been very grateful for the skills that they have learned and are applying on a daily basis in their lives."

School Based Services and others, under the direction of Staci Oakes, made 103 Christmas cards and sent them to patients at St. Jude Children's Research Hospital. The hospital sent to us the following thank you message: "Thank you for your gift of handmade Christmas cards sent by Wasatch Mental Health for our patients at St. Jude Children's Research Hospital. We appreciate your hard work and support."

Bethany Combs, case manager, received the following email memo for some good work she did in the Nebo School District: "Last week in our Special Education Staff meeting John Ballard was very complimentary of you. He mentioned that you had been very helpful in working through some communication issues and that you are very supportive of working with Nebo School District to make sure students involved with Wasatch are appropriately served. I wanted you to know that your support and understanding is very much appreciated. It is nice to have great agencies with great people to partner with as we serve students."

We received some specific feedback regarding the services we have provided at the Dixon Middle School this year. A school counselor said the following: "Dixon Middle School has benefited more than words can express by having Wasatch Mental Health represented at the school. There have been countless times that our school has successfully utilized the services of Wasatch Mental Health by having Elizabeth Feil's office at our school. Many parents and students have been able to receive consultation and services through this coordinated and team approach. This team approach has afforded a forum to consult and screen student needs together and overcome many prejudices that may have been preventing parents and/or students from considering the option to receiving counseling services through the available agencies. Having Elizabeth Feil located here at Dixon Middle School representing both Wasatch Mental Health and also Provo School District has strengthened the schools ability to counsel and work with students and parents and meet the diverse needs of the population we serve. Without hesitation I would recommend continuing having a representation from Wasatch Mental at our school. It has been a true delight to work with Elizabeth Feil at our school."

NEW VISTA YOUTH DAY TREATMENT SERVICES

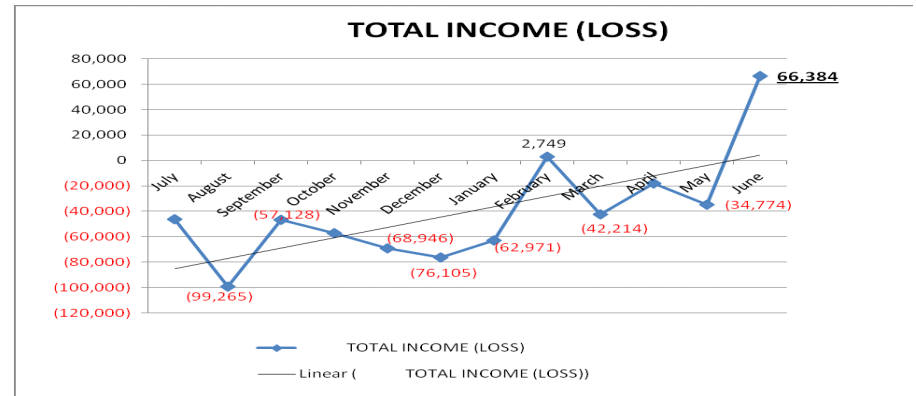
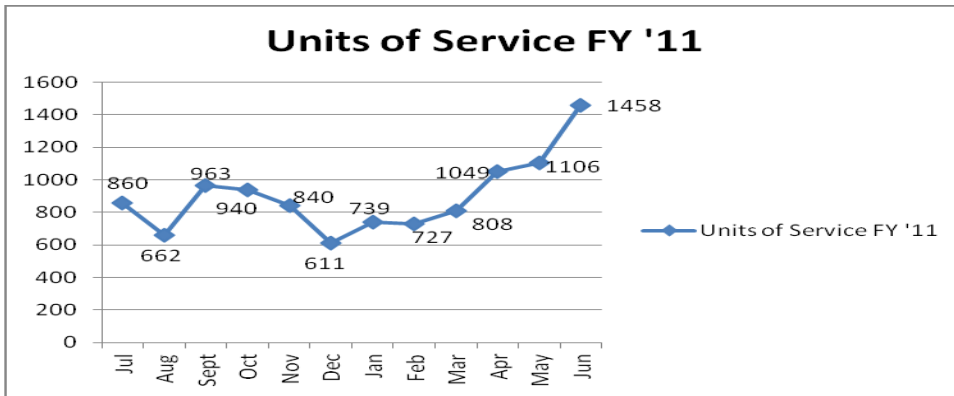


Greg Robinson, LCSW
Program Manager

New Vista is a Day Treatment program focused on treatment for youth ages 8 yrs to 19 yrs who have sexual behavior problems. These youth are referred by the courts and our allied agencies, Division of Juvenile Justice Services (20%) and Division of Child and Family Services (80%). These youth all have problems of different intensity with sexual touching. We follow treatment protocols set forth by the NOJOS organization (see www.nojos.org) and we treat both males and females at NOJOS levels 1, 2 and 3. NOJOS Levels 1 & 2 are outpatient levels while NOJOS Level 3 is our Day-treatment program. In FY '11 we served 90 clients in New Vista Youth Services, in any of the three NOJOS levels of service.

As can be seen in the charts below, we struggled with providing enough services and cutting enough costs to be able to break even financially. The chart on the left shows our total monthly units of service and the chart to the right shows our total income (loss), with trend line.

As can be seen our trend began to increase at the beginning of this calendar year and has been increasing every month since then.



GIANT STEPS

A Program For Pre-School Aged Children With Autism

GIANT Steps is a unit of Wasatch Mental Health's (WMH) Division of Children and Family Services. We run a day-treatment program for preschool-aged children diagnosed with an Autism Spectrum Disorder (ASD) either before or at the time of assessment. Our unit has three classrooms with a capacity of 12 children, serving a total of 36 preschoolers and their families. Because of our high number of staff, we are able to provide a 1 to 2 ratio of teacher to students throughout most of the day; and a 1 to 3 ratio for the remainder. In addition to full- and part-time classroom staff, we employ a social worker, case manager, and have medical staff available at our facility semiweekly. We have formed a partnership with Alpine School District to provide Special Education IEPs and school services for our students. This relationship also allows us to run our program in a typical school setting. Our program runs Tuesday through Friday from 9:00 a.m. to 3:20 p.m. We follow the Alpine School District schedule throughout the school year but continue our program until the end of June. During the month of July we provide a small summer program in the Parkview Center at the WMH Campus in Provo.

Parent Responsibilities:

Class Volunteer Time: Each family is required to volunteer in class 1 hour a week.

Parent Training: Parent Trainings are held 2-3 times each month.

Field Trips: Field Trips about once a month. Parents attend at least two during the year.

FY 2010-2011 Highlights:

- 36 pre-school aged children were served by the GIANT Steps program.
- 24 children graduated to kindergarten. 24 new children were admitted.
- The children enjoyed monthly field trips.
- Sibling Support groups were offered to siblings ages 8 – 12.
- Partial day treatment program was offered to clients during school breaks. Attendance varied from approximately 4 – 8 clients a day.
- During July children were offered a two day/week 6 ½ hour/day treatment. Two sessions were available; Monday/Wednesday and Tuesday/Thursday. 24 children attended.
- A “make it and take it” workshop was offered to GIANT Steps parents to help them provide home programming. The parents were able to make charts, file folder games and other items to help their children at home.
- Parent trainings occurred throughout the year. Various topics were discussed.
- Child care for the parent trainings and parent support groups were provided by BYU & UVU service clubs under the direction of the GIANT Steps staff.

Feedback from Parents:

“...We can never repay all of you for the tremendous effort you put forth, but we hope you know how thankful we'll always be for everything.”

“...he loves coming to school. I am so grateful he is somewhere safe and caring. This year has been wonderful!”

“I can't believe that it's been almost three years since we started on this “journey” known as Giant Steps. I have often thought to myself that if it wasn't for Logan and his Autism, despite all of its challenges, we would never have had the privilege of ever meeting such incredible people. Our family has been richly blessed because of it. Many, many thanks to you for everything... what a joy it is to experience my son speaking for the first time while attending G.S. in addition to the other milestones he has achieved since.”

GIANT Steps Outcomes 2010-2011

Average PEP-3 Point progress per month (of 344)	In school year, program average is 45 raw score points improvement per/child on PEP-3 (out of 344)
Average Communication Progress per month (in months)	In school year, program average is 9.3 month improvement per/child in communication skills (as compared to typical child-sample)
Average Motor Progress per month (in months)	In school year, program average is 5.2 month improvement per/child in motor skills (as compared to typical-child sample)
Average Parent Report Progress per month: Problem Behaviors (%)	In school year, program average is 1.0% rank improvement per/child in problem behaviors (as compared to autism-child sample in PEP-3 standardized percentile rank)
Average Parent Report Progress per month: Personal Self Care (%)	In school year, program average is 4.1% rank improvement per/child in personal self care (as compared to autism-child sample in PEP-3 standardized percentile rank)
Average Parent Report Progress per month: Adaptive Behavior (%)	In school year, program average is 0.4% rank improvement per/child in adaptive behavior (as compared to autism-child sample in PEP-3 standardized percentile rank)
Average CARS difference per month (of 60)	In school year, program average is 1.1 point decrease of autism traits per/child on CARS (out of 60)

VANTAGE POINT YOUTH SERVICE CENTER

July 1, 2009—June 30, 2010



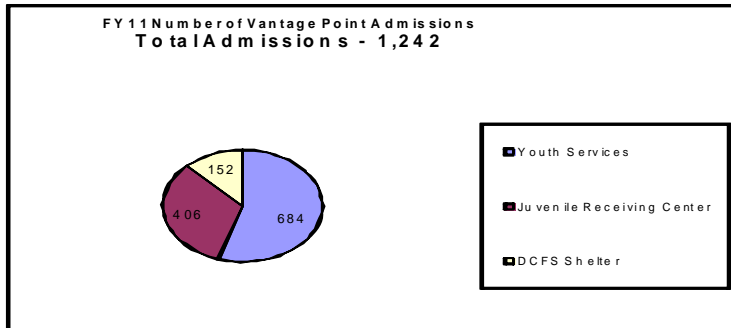
Scott Taylor, LCSW

Vantage Point is a multiple service, short-term crisis residential program for adolescents, providing three important community services: (1) Youth Services, (2) Juvenile Receiving, and (3) DCFS Emergency Shelter Care. Vantage Point is primarily funded through a contract with Juvenile Justice Services. Other funding comes from the Division of Child and Family Services, and Wasatch Mental Health.

Youth Services

Youth Services provides services to teens and families in crisis due to a youth's ungovernable or runaway status, or where there is a serious parent-child conflict. Counseling is provided to resolve family conflict, and to maintain or reunite youth with their families. Our goal is to divert ungovernable youth from the juvenile justice or child welfare systems. Essential services include: 24-hour, 7 days per week crisis intervention, short-term shelter/time out placement, and family counseling. Youth Services accepts youth ages 12 through 17. We provide individual, family, and group therapy; skills development services and behavior management; outpatient family relationship, substance abuse, girls self-esteem, and anger management groups; and case management, mental health assessments, and referral services.

	<u>Youth Services</u>	<u>Juvenile Receiving</u>	<u>DCFS Shelter</u>
Bed Days	1116	182	915
Average Length Of Stay	1.75 days	9.4 hours	4.7 days
<u>Number of Admissions / Percent of Program's Total</u>			
Gender			
Male	374 / 54 %	191 / 47%	74 / 48%
Female	310 / 46%	215 / 53%	78 / 52%
Age			
10-13	204 / 30%	101 / 25%	41 / 27%
14-15	279 / 41%	159 / 39%	68 / 45%
16-17	201 / 29%	146 / 36%	43 / 28%



Juvenile Receiving

Co-located with Youth Services, Juvenile Receiving is a 24-hour, 7 days per week reception, screening/evaluation, and referral service for all juvenile offenders who do not qualify for admission to secure detention. Juvenile Receiving relieves a major problem for police officers that detain a youth and have no place to release them. It also provides a timely and appropriate conduit to services for troubled/delinquent youth and their families. Once a youth is "received" from law enforcement, Juvenile Receiving will conduct an initial screening to determine interventions that may be needed, and to facilitate a referral to the appropriate providers. Often youth are referred to the Youth Services program at Vantage Point.

DCFS Emergency Shelter

Vantage Point also provides temporary emergency placement for youth in the custody of the Division of Child and Family Services. These are youth that have been removed due to abuse or neglect, and/or youth who have unexpectedly experienced a disruption in their foster care placement.

STRIDE! Children's Day Treatment Program

July 1, 2010 – June 30, 2011

Stride is a 5 day a week, 13 week long, day treatment program for Elementary age children ages 5 – 12. The program also includes a weekly parent educational group that provides parenting training that compliments the day treatment curriculum.

The Stride program is designed to assist elementary school-age children who are experiencing social skill deficiencies due to mental illness and emotional challenges. The goal of the program is to provide a positive environment where children can feel accepted, confident, and successful while at the same time gain social skills in areas such as anger management, compliance, honesty, and getting along with others.

Each day at Stride, the children have a lesson on a specific social skills topic, time to work on homework from school, activity time, relaxation time, and snack time. Group therapy is provided once a week during the school year and daily during the summer. Each day the children bring a report on their behavior from school and home using a tracking sheet. This enables the school and parent or guardian to be involved in the program.

Mission Statement

The mission of the Stride Program, in cooperation with the parents and teachers, is to provide quality learning of social skills by:

- Equipping children with the basic social skills of life,
- Heightening awareness of the consequences of chosen actions, and
- Ensuring a positive environment where children feel accepted, confident, and successful.

In FY 2011 The Stride Program:

- Served 166 different children
- Provided 2,742 hours of group skills development treatment
- Provided 1,153 hours of therapy and or clinical assessments
- Provided 13,406 hours of case management or behavior management treatment



Wasatch Mental Health Programs

Address and Telephone Directory

24 -Hour Emergency Crisis Services
373-7393

Administration
750 North 200 West, Suite 300, Provo
Phone: 801-373-4760

Adult Outpatient
750 North 200 West, Provo
Phone: 801-373-9656

Alpine House
156 South 300 West, Provo
Phone: 801-373-7443 or 373-9042

American Fork Outpatient
548 East 300 South, American Fork
Phone: 801-763-5010

Crisis
750 North 200 West, Suite 102, Provo
Phone: 801-373-4766

GIANT Steps (Autism Services)
Foothill Elementary School
921 North 1220 East, Orem
Phone: 377-1213

Intensive Residential Treatment (Adult)
1157 East 300 North, Provo
Phone: 801-377-4668

Lakeview Day Treatment
1175 East 300 North, Provo
Phone: 801-373-7443

New Vista
1189 East 300 North, Provo
Phone: 801-375-9226

Spanish Fork Clinic
607 East Kirby Lane, Spanish Fork
Phone: 801-794-6700

School-Based Services
1161 East 300 North, Provo
Phone: 801-373-4765

Stride
1165 East 300 North, Provo
Phone: 801-373-4765

Supportive Residential Living (Adult)
956 West 900 South, Payson
Phone: 801-373-7443

Targeted Case Management (Adult)
750 North 200 West, Suite 108, Provo
Phone: 801-373-7394

UVRMC Inpatient Services
1034 North 500 West
Phone: 801-357-7376

Vantage Point/Youth Services Center
1185 East 300 North, Provo
Phone: 801-373-2215

Wasatch House - Clubhouse (Adult Day Treatment)
605 East 600 South, Provo
Phone: 801-373-7440

WATCH Program (Homeless)
299 East 900 South, Provo
Phone: 801-852-3779

Wellness Recovery Clinic
580 East 600 South, , Provo
Phone: 801-852-3789

Youth Outpatient
1165 East 300 North, Provo
Phone: 801-377-1213